

Incontinence

Incontinence (accidents of the bladder and bowels) can be caused by dementia. It usually gets worse as the disease continues. However, there may be other reasons why a patient is incontinent. You need to know why the patient may be incontinent and different solutions for handling the problem.

Here are some reasons the patient may be incontinent:

- Problems finding a bathroom and getting there
- Trouble with eyesight
- Fear
- Physical problems
- Confusion
- Trouble getting clothes on and off
- Physical illness
- Food and liquid intake
- Medicines

How to cope with the patient's incontinence...

Be creative.

- ☐ Be open-minded and willing to try new ideas.
- ☐ Remember that everyone is different. What is helpful for one patient may not be helpful for another.
- ☐ Experiment with different ideas.

Be understanding.

- ☐ If an accident happens, stay calm. Becoming upset will upset the patient.
- ☐ Accidents can be embarrassing. Do not blame or scold the patient.
- ☐ Accidents can be upsetting. Say something reassuring like, "Soon it will all be OK."
- ☐ The patient may feel uncomfortable or embarrassed about you cleaning up or assisting in the bathroom. Try to reassure the patient.
- ☐ Praise the patient when she uses the bathroom properly. Do not punish or scold if she does not use it correctly.

Communicate clearly with the patient.

- ☐ Give the patient short and simple instructions.
- ☐ Speak to the patient in a reassuring way. Use a calm tone of voice.
- ☐ Try to get the patient to tell you when he needs to use the bathroom. The patient might not really know he needs to use the bathroom. He might be able to guess.
- ☐ Learn what words the patient uses when referring to the bathroom. These may be words like "tinkle" or "take a leak." Use these words when speaking to the patient about using the bathroom.

- ☐ Listen carefully to what the patient says. The patient may use the wrong words like “tea” or “take a peek”. What the patient says may not be what she means.
- ☐ Pay attention to behavior. The patient may become restless, make sounds and faces, pull at pants and zipper, or pace when he needs to go to the bathroom.
- ☐ Explain to family members, helpers, and others about the patient’s problem. Tell them how they can help.
- ☐ Give the patient step by step instructions. Say, “Unzip your pants. Now, pull them down. Now, sit down on the toilet.”

Set up a toileting schedule.

- ☐ Pay attention to the patient’s habits. Does the patient have accidents at certain times each day or following certain activities? Once you notice patterns, have the patient use the bathroom prior to these times.
- ☐ Keep a diary of when accidents occur. This will help you develop a schedule and plan.
- ☐ Make sure the patient uses the bathroom before or after meals and also before bed.
- ☐ Do not assume the patient is using the bathroom. Check on him while he is in the bathroom. See if he needs help with clothes, wiping, or flushing.
- ☐ Now and then, ask the patient if she needs to use the bathroom.

Modify the environment.

- ☐ If the patient has trouble finding the bathroom, paint the bathroom door a bright color. Put a picture of a toilet on the door. You might also want to spell out the word “bathroom” on the door. Use large, bold letters.
- ☐ Remove anything blocking the way to the bathroom, such as furniture. Remove rugs that could cause the patient to slip or trip.
- ☐ Consider removing receptacles, such as trashcans, or covering them. The patient may mistake them for a toilet.
- ☐ If the patient uses a closet as a toilet, consider putting a lock on the door.
- ☐ Make sure the bathroom and hallway are clearly lit. This is important around dusk and once it is dark. It is best to leave a nightlight on in the bathroom and bedroom.
- ☐ If the patient needs to go to the bathroom at night, put a portable commode or urinal near the bed.
- ☐ Install a raised toilet seat and grab bars. These will make it easier for the patient to get up and down. Grab bars attached to the toilet seat are often easier for patients to grasp and use.
- ☐ Make sure the patient can sit comfortably long enough on the toilet. A soft, padded toilet seat is more comfortable for the patient who needs to sit awhile.
- ☐ If the patient is able to let you know he needs help, have a bell handy. The patient can ring you from the bathroom for help.

Make toileting easier.

- ☐ Give the patient a towel to fold or twist, a magazine to look at, or something else to hold while on the toilet. These will help to keep the patient distracted and seated.
- ☐ You can help the patient to go to the bathroom. Give him a drink of water, run water in the sink, or rub his belly above the bladder.
- ☐ Have the male patient sit down when urinating.
- ☐ Do not rush the patient. Give the patient plenty of time in the bathroom.

Simplify clothing.

- ☐ Make sure the patient's clothes are simple and easy to care for.
- ☐ Choose clothing that is comfortable and easy to take on and off. Clothing with elastic waistbands, such as sweatsuits, are easier for the patient to wear and slip on and off.
- ☐ Use velcro-type fasteners instead of zippers and buttons. These items can be purchased at fabric stores.
- ☐ The patient may want to stop wearing underwear to make undressing in the bathroom easier.
- ☐ Use disposable adult underwear, in case there is an accident.

Make sure the patient gets proper fluids and foods.

- ☐ Keep a food diary. You can track which foods make the patient constipated or have loose bowels. Also keep track of how much fluid she is drinking.
- ☐ Make sure the patient is getting enough to drink. If not, urine will become concentrated. Urinating will be painful. The urge to urinate will be more frequent.

- ☐ Make sure the patient has 5-8 glasses of liquid daily.
- ☐ Cut down on drinks such as cola, coffee, tea, and grapefruit juice. They can increase urination and accidents.
- ☐ Decaffeinated herbal teas or decaffeinated coffee, Jell-O, fruit juice, or popsicles are good fluid sources.
- ☐ Have the patient drink a glass of water after going to the bathroom.
- ☐ Limit the patient's fluid intake two hours before bedtime. Do not give the patient drinks during the night unless it is for medicine or because the weather is warm.
- ☐ Give the patient plenty of liquids, fruits, vegetables, and fiber to prevent constipation.

Prepare for accidents.

- ☐ Keep a watch on the patient's indoor and outdoor activities. He can mistake a trashcan, sink, or shrub for a toilet. If this happens, take the patient to the bathroom. Do not yell or blame.
- ☐ Use disposable pads for beds and chairs. In an emergency, a garbage bag will work.
- ☐ Use a rubber sheet or a small rubber/fabric pad (available at most local retailers) on the patient's bed.
- ☐ Try using a "draw sheet" across the patient's bed. A draw sheet is a bed sheet that is folded in half lengthwise and tucked across the bed. You can then place a plastic pad between it and the fitted bed sheet. If the patient has an accident, you only have to remove the draw sheet and change the pad.
- ☐ Prevent the skin from becoming irritated. Make sure the skin is not exposed to wet material for long periods. Apply protective ointments to the skin when needed.

- ☐ Keep the patient's skin clean by washing regularly. Use a washcloth or baby wipes.
- ☐ Use baking soda and water occasionally to wash odor from the skin.
- ☐ Have extra clothes and cleaning materials on hand when traveling.
- ☐ For male patients, catheters may be useful. Talk to the patient's doctor.

Contact the patient's doctor.

- ☐ If the patient is sick or has a fever.
- ☐ To make sure that the patient does not have another illness that is causing the incontinence. For example, urinary tract infections may cause incontinence.
- ☐ To see if the patient might have a vision problem, making it hard to see the bathroom.
- ☐ If the patient is constipated or is going to the bathroom more or less than usual.
- ☐ If the patient is taking medicines such as tranquilizers, sedatives, or diuretics that might increase accidents.
- ☐ If the patient has accidents while coughing, sneezing, or laughing.
- ☐ To see if a medicine for incontinence might help the patient.

